TSLAC Group Webinar Sign in Sheet Webinar Title: **Host Site Institution Name and City:** Date:_____ Library employees, please indicate library type (Academic, Public, School, Special) **Others, please note title or role** **Organization or Employer Email Address** Name

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TSLAC Group Webinar Sign in Sheet

			Library employees, please indicate library type (Academic, Public, School, Special) **Others, please note
Name	Email Address	Organization or Employer	title or role**
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